

UNITED STATES DISTRICT COURT
EASTERN DISTRICT OF MICHIGAN
SOUTHERN DIVISION

JOHN MANFREDI and
JANICE MANFREDI,

Plaintiffs,

vs.

No. 92-CV-75201-DT
Hon. Gerald E. Rosen

LORRAINE CAB COMPANY, GERALD
EUGENE MILLER, CITY OF DETROIT,
CITY OF DETROIT HOUSING
COMMISSION, HOSIE KING,
DEPENDABLE LAWN SERVICE, INC.,
AND WILLIE B. MORRIS,

Defendants.

ORDER GRANTING DEFENDANTS CITY OF DETROIT, CITY OF DETROIT
HOUSING COMMISSION AND HOSIE KING'S MOTION FOR SUMMARY JUDGMENT

At a session of said Court, held in
the U.S. Courthouse, Detroit, Michigan
on Jan 30 1993

PRESENT: Honorable Gerald E. Rosen
United States District Judge

I. INTRODUCTION

Plaintiffs John Manfredi and Janice Manfredi instituted this diversity of citizenship personal injury action in the United States District Court for the Eastern District of Pennsylvania on August 28, 1992. The case was transferred to this Court, and Defendants City of Detroit, City of Detroit Housing Commission, and Hosie King have moved for summary judgment on the grounds that Michigan law proscribes tort liability stemming from automobile accidents.

II. PROCEDURAL HISTORY

In their complaint, Plaintiffs allege that Defendants

negligently caused the car in which Mr. Manfredi was riding to be hit. The case file reveals that Defendants Lorraine Cab Company and Gerald Eugene Miller have been dismissed from the case. Further, at oral argument, counsel informed the Court that Defendants Dependable Lawn Service, Inc. and Willie B. Morris have been dismissed.

Following the close of discovery, several Defendants moved for summary judgment, pursuant to Fed. R. Civ. P. 56, on the grounds that Michigan law proscribes non-economic tort liability for car accidents. Plaintiff filed a response opposing Defendants' Motion for Summary Judgment on July 1, 1993.

Having reviewed the parties' respective briefs and the exhibits attached thereto, and having heard the oral arguments of counsel on July 29, 1993, the Court is now prepared to rule on Defendants' Motion, and this Opinion and Order sets forth that ruling.

III. FACTUAL BACKGROUND

On June 2, 1990, Plaintiff John Manfredi, a Pennsylvania citizen who was in Detroit on business, was involved in a motor vehicle accident in the City of Detroit. At the time of the accident, Mr. Manfredi was a passenger seated in the back seat of Defendant Lorraine Cab Company's cab. The cab was struck from behind by a motor vehicle operated by Defendant Hosie King ("King"), and the force pushed the cab into the truck in front of it. Defendant King's vehicle was owned by the City of Detroit and

the City of Detroit Housing Commission. Further, Defendants King, the City of Detroit, and the City of Detroit Housing Commission were insured for purposes of Michigan's No-Fault Act.

Immediately after the impact, Mr. Manfredi exited the cab to check on the passengers in the vehicle in front of the cab and after verifying that they were okay, he walked up the side of the hill off the freeway. See Plaintiff's deposition at 41-42. An ambulance eventually arrived at the scene and transported Mr. Manfredi to Doctor's Hospital.

At the hospital, an examination revealed a mild compression deformity in Mr. Manfredi's lumbar sacral spine. Other than receiving a tetanus shot, the hospital provided no treatment, but recommended that Mr. Manfredi follow up with an orthopedic doctor and follow that doctor's instructions.

Mr. Manfredi stayed in Detroit that evening as planned, attended his business function, and flew back to Philadelphia the following morning. After arriving back home, Mr. Manfredi contacted his family physician, Dr. Kinkaid, and complained of pain in his left shoulder, back, left ankle, left wrist, left elbow, and of a sensation in his legs and left arm. Dr. Kinkaid ordered that he undergo an MRI of his cervical spine, lumbar spine, left shoulder, and left elbow, and ordered that Mr. Manfredi undergo a CT Scan of his thoracolumbar spine. Further, Dr. Kinkaid referred Mr. Manfredi to Chester County Hospital for physical therapy.

On June 8, 1990, Dr. William J. Berry of Chester County Radiologic Associates, P.C., issued a letter to Dr. Kinkaid that

describes his professional opinion regarding Mr. Manfredi's injuries. Dr. Berry found "an element of wedging involving the body of T-12 [lumbosacral spine]" and suggested that "[t]his certainly could be from trauma and represent a compression fracture." However, he found that Mr. Manfredi's cervical spine, vertebrae, discs, left shoulder, and left elbow showed no signs of injury. Dr. Wushensky, another physician apparently at Chester County Radiologic Associates, indicated that the CT scan of the thoracolumbar spine revealed what may amount a very subtle anterior compression.

Next, Mr. Manfredi was referred to Dr. Mark P. Brigham, and he visited Dr. Brigham on August 28, 1990. Dr. Brigham noted that at that time, Mr. Manfredi complained of pain in his left shoulder and mid and upper back. Dr. Brigham prescribed physical therapy and anti-inflammatory medication, and recommended that Mr. Manfredi follow up with him six weeks later. According to Dr. Brigham, Mr. Manfredi missed his appointment and eventually showed up some five months later, approximately January, 1991. Dr. Brigham noted that at his January, 1991 visit, Mr. Manfredi complained of pain and numbness in his right shoulder for the first time, and Dr. Brigham prescribed a vigorous therapy program. The doctor reported that Mr. Manfredi only attended therapy sporadically and did not take prescribed medication.

Dr. Brigham ordered an MRI of Mr. Manfredi's right shoulder, and it revealed an apparent partial tear of his right rotor cuff. The doctor administered an injection of cortisone and xylocaine

into the right shoulder, and that treatment improved that shoulder's condition. Next, Mr. Manfredi returned to Dr. Brigham because of pain in his left shoulder, and therapy and injections did not seem to help the condition. In October of 1991, Dr. Brigham told him that if the condition in his left shoulder did not improve over several weeks, the doctor would discuss surgery with Plaintiff. Since that October date, Mr. Manfredi has not returned to see Dr. Brigham, who opines that Mr. Manfredi should recover from all his injuries but may need surgical intervention to help his shoulder fully recover.

On or about January 13, 1992, and February 3, 1992, Mr. Manfredi visited Dr. Mansmann of Ruggiero Orthopedic Associates. Ltd. Dr. Mansmann's notes indicate that Mr. Manfredi has a 90% to 95% range of motion of lumbosacral spine, and 98% range of motion of his left shoulder. Further, his notes indicate that he was in the process of "[r]esolving shoulder bursitis tendinitis and a compression fracture at T-12." Dr. Mansmann also indicated that an examination of Mr. Manfredi's MRI revealed a right rotor cuff tear.

Next, Mr. Manfredi apparently visited a Dr. Kambin, who opined on August 17, 1992 that Plaintiff has lumbar disc syndrome with nerve root irritation.

On August 28, 1992, over two years after the accident, Plaintiffs filed their personal injury action. At the request of Defendants, Mr. Manfredi was evaluated by Dr. Stanley R. Askin on May 21, 1993. Dr. Askin's report indicates that Mr. Manfredi complained of lower back pain, left shoulder pain, right leg

numbness, and neck pain. Dr. Askin noted that he examined a March 5, 1991 MRI of Mr. Manfredi's right shoulder, which indicated a condition most consistent with a partial tear. However, Dr. Askin noted that Mr. Manfredi now complained of pain only in his left shoulder, not his right shoulder. Although Dr. Askin agreed that it was conceivable that Mr. Manfredi suffered a T-12 compression fracture as a result of the accident, he opined that the area of low back pain does not correspond to the area of where a fracture was thought to have occurred. Dr. Askin concluded by noting that the "accident can be seen as potentially serious only with respect to the left shoulder, which sometimes requires surgical intervention to resolve."

Although Mr. Manfredi has only missed eight hours of work as a result of the accident, his deposition testimony reveals his claim that he is no longer to take part in several activities:

- Q. What activities, if any, were you involved in prior to this accident that you don't participate in or aren't involved in now?
I'll explain a little more.
Any kind of social activities, hobbies, things like that.
- A. I found where my work ethics has changed. As you're noticing today, I can't sit for very long. I played a little golf before the accident. I can't walk very long because my leg will get numb on me. I have a six-year old son and my son likes to wrestle with me on the floor and I can't do that very often because my back bothers me quite bad.
- Q. Anything else?
- A. I know that the property that we live on has around 10 or 11 acres of grass to cut and I have a riding tractor but with all the bouncing and jumping up and down, I have a new gardener now. My wife does the grass cutting, so I find where things like that have changed.

Mr. Manfredi's Deposition at 79-80.

IV. ANALYSIS

A. THE STANDARDS GOVERNING CONSIDERATION OF A MOTION FOR SUMMARY JUDGMENT.

Summary judgment is proper "if the pleadings, depositions, answer to interrogatories, and admissions on file, together with the affidavits, if any, show that there is no genuine issue as to any material fact and that the moving party is entitled to judgment as a matter of law." Fed. R. Civ. P. 56(c).

Three 1986 Supreme Court decisions -- Matsushita Electrical Industrial Co. v. Zenith Radio Corp., 475 U.S. 574, 106 S.Ct. 1348 (1986); Anderson v. Liberty Lobby, Inc., 477 U.S. 242, 106 S.Ct. 2505 (1986); and Celotex Corp. v. Catrett, 477 U.S. 317, 106 S.Ct. 2548 (1986) -- ushered in a "new era" in the standards of review for a summary judgment motion. These cases, in the aggregate, lowered the movant's burden on a summary judgment motion.¹ According to the Celotex Court,

In our view, the plain language of Rule 56(c) mandates the entry of summary judgment, after adequate time for discovery and upon motion, against a party who fails to make a showing sufficient to establish the existence of an element essential to that party's case, and on which that party will bear the burden of proof.

Celotex, 106 S.Ct. at 2552.

¹"Taken together the three cases signal to the lower courts that summary judgment can be relied upon more so than in the past to weed out frivolous lawsuits and avoid wasteful trials." 10A C. Wright, A. Miller, M. Kane, Federal Practice & Procedure, § 2727, at 29 (1991 Supp.).

After reviewing the above trilogy, the Sixth Circuit established a series of principles to be applied to motions for summary judgment. They are summarized as follows:

* Cases involving state of mind issues are not necessarily inappropriate for summary judgment.

* The movant must meet the initial burden of showing "the absence of a genuine issue of material fact" as to an essential element of the non-movant's case. This burden may be met by pointing out to the court that the respondent, having had sufficient opportunity for discovery, has no evidence to support an essential element of his or her case.

* The respondent cannot rely on the hope that the trier of fact will disbelieve the movant's denial of a disputed fact, but must "present affirmative evidence in order to defeat a properly supported motion for summary judgment."

* The trial court no longer has the duty to search the entire record to establish that it is bereft of a genuine issue of material fact.

* The trial court has more discretion than in the "old era" in evaluating the respondent's evidence. The respondent must "do more than simply show that there is some metaphysical doubt as to the material facts." Further, "[w]here the record taken as a whole could not lead a rational trier of fact to find" for the respondent, the motion should be granted. The trial court has at least some discretion to determine whether the respondent's claim is plausible.

See Street v. J.C. Bradford & Co., 886 F.2d 1472, 1479-80 (6th Cir. 1989). The Court will apply the above principles in deciding Defendants' motion for summary judgment in this case.

B. PLAINTIFFS' NEGLIGENCE CLAIM FOR NON-ECONOMIC TORT LIABILITY IS BARRED BY MICHIGAN STATUTE, SINCE, AS A MATTER OF LAW, PLAINTIFFS ARE UNABLE TO SATISFY THE THRESHOLD REQUIREMENT OF DEMONSTRATING A SERIOUS INJURY.

Under Michigan's no fault automobile insurance law, a person may not recover non-economic loss for tort liability unless the person suffered death, serious impairment of body function, or

permanent serious disfigurement:

A person remains subject to tort liability for non-economic loss caused by his or her ownership, maintenance, or use of a motor vehicle only if the injured person has suffered death, serious impairment of body function, or permanent serious disfigurement.

Mich. Comp. Laws. Ann. § 500.3135(1).

The purpose of the no-fault act is to remedy the problems of traditional tort recovery, including overcompensation of minor injuries, under-compensation of serious injuries, long payment delays, over-burdened court systems, and discrimination against low income people. See DiFranco v. Pickard, 427 Mich. 32, 41, 389 N.W. 2d 896, 902 (1986). The law requires everyone to possess motor vehicle insurance and permits the insured to recover benefits from his or her own carrier, regardless of fault. Id. Although many states have decided entirely to eliminate an injured person's right to recover non-economic damages from a negligent owner or operator, Michigan permits such suits if the injuries sustained are sufficiently serious. Id. at 42, 389 N.W.2d at 902.

In the instant case, Mr. Manfredi insists that his ailments satisfy the second condition of being permitted to bring a negligence action, namely, "serious impairment of body function." In the seminal case of DiFranco v. Pickard, 427 Mich. 32, 41, 389 N.W. 2d 896, 902 (1986), the Michigan Supreme Court thoroughly discussed the requirements of bringing a negligence action because of "serious impairment of body function:"

The 'serious impairment of body function' threshold contains two straight-forward inquiries:

- 1) What body function, if any, was impaired

because of injuries sustained in a motor vehicle accident?

2) Was the impairment serious?

The focus of these inquiries is not on the injuries themselves, but how the injuries affected a particular body function. Generally, medical testimony will be needed to establish the existence, extent, and permanency of the impairment. Identifying which body functions were impaired is a relatively easy task. Determining whether the impairment was serious requires a much more complicated evaluation of factors.

The extent of an impairment is often expressed in numerical terms. A person who suffers a permanent seventy-five-percent limitation in back movement has clearly suffered a serious impairment of back function, while a person with a permanent five-percent limitation probably has not. However, the particular body function impaired may also make a difference. A ten percent permanent reduction in brain functioning is a more serious impairment of body function than a ten-percent limitation in neck motion.

The length of time the impairment of body function lasts must also be considered. A person who is rendered unconscious for several minutes at the scene of the accident has suffered a substantial impairment of brain functioning during those minutes. If there are no further problems, the impairment overall does not appear serious. A permanent impairment is more serious than a temporary impairment of like character. However, the fact that the plaintiff eventually makes a complete recovery should not negate the fact that he endured a serious impairment of body function for a significant period of time. A permanent impairment may or may not be serious, depending on the extent of the impairment and body function affected.

The type of treatment required to rectify the impairment may also be relevant. An impairment which can only be corrected by surgery may be more serious than one that can be remedied by bed rest. A comparison of the plaintiff's abilities and activities before and after the accident may be relevant insofar as it established the existence, extent, and duration of an impairment of body function. Additional relevant factors may also be considered in determining seriousness.

Id. at 67-68, 398 N.W.2d at 914-15 (emphasis added).

Thus, to maintain this type of action for non-economic damages arising out of an automobile accident, a plaintiff must first prove

that the injuries he sustained in the accident impaired one or more body functions. Then, the fact finder should determine whether the impairments are serious, by considering (1) the extent of the impairment, (2) the length of time the impairment lasted, (3) the type of treatment required to correct the impairment, (4) a comparison of the plaintiff's activities before and after the accident, and (5) any only relevant factors. Id.

In applying the above factors, the Court finds that Plaintiffs have failed to submit sufficient evidence to withstand summary judgment and, thus, no reasonable trier of fact could find by a preponderance of evidence that as a result of the accident, Mr. Manfredi suffered a "serious impairment of body function."

1. What Body Function Was Impaired As A Result Of The Accident.

Plaintiffs argue that Mr. Manfredi's following body functions were impaired as a result of the accident: (1) right shoulder (torn rotor cuff and numbness); (2) back (compression deformity or fracture of T-12 -- lumbar sacral spine); (3) left shoulder (tendinitis); (4) left arm (sensation); (5) neck (strain and sprain); (6) left ankle (sprain); (7) left leg (sensation); and (8) right leg (sensation).

Plaintiffs have failed to present sufficient evidence that any of the above functions besides Mr. Manfredi's back, left shoulder, and left arm, were actually impaired by the accident. Especially lacking, is any evidence that his right shoulder was injured as a result of the accident. In fact, all available evidence shows that Mr. Manfredi did not even complain about right shoulder pain until

his January, 1991 appointment with Dr. Brigham -- seven months after his accident. However, for the purposes of the instant motion, the Court will assume that the above eight body functions were so impaired.

2. Whether The Impairments Are Serious.²

A. Right shoulder.

Plaintiffs argue that the torn rotor cuff and numbness in Mr. Manfredi's right shoulder constitute a serious impairment of body function. However, the Court finds as a matter of law that Plaintiffs have failed to submit sufficient evidence that the impairment is sufficiently serious to maintain this action.

First, looking at the extent of the right shoulder impairment, the Court notes that one of Mr. Manfredi's own treating physicians, Dr. Brigham, found that injections improved the condition of Mr. Manfredi's shoulder. Further, other than a general complaint of pain, Plaintiffs have failed to present any evidence demonstrating the extent of Mr. Manfredi's right shoulder impairment. In fact, the only evidence presented to the Court regarding the limitations of Mr. Manfredi's right shoulder, was Dr. Askin's report, which indicated that his right shoulder evinces unrestricted and unhesitant motion to 180 degrees of forward flexion and abduction.

Turning to the length of time of his right shoulder

²The Court notes that although the DiFranco decision did not explicitly discuss which aspect of the inquiry incorporates a plaintiff's complaints of pain, the Court will discuss the pain when analyzing the first inquiry, the extent of the injury, since if the pain is disabling it would presumably effect a plaintiff's ability to use a particular body function.

impairment, the Court finds that Plaintiffs have also failed to present sufficient evidence regarding this criteria. There is no evidence that said impairment is permanent. In fact, Plaintiffs' own evidence indicates that Mr. Manfredi did not complain about pain in his right shoulder until a January, 1991 appointment with Dr. Brigham -- seven months after his accident. Even assuming that the right shoulder impairment was caused by the accident, Plaintiff's own evidence indicates that Dr. Brigham's administration of an injection of cortisone and xylocaine improved that shoulder's condition.

Third, the type of treatment, injections of cortisone and xylocaine, do not support a finding of serious impairment.

Likewise, a comparison of Mr. Manfredi's activities before and after the accident do not support a finding that his right shoulder is seriously impaired. The Court does not find that his right shoulder impairment affects Mr. Manfredi's ability to sit for long periods of time. Further, Mr. Manfredi admitted at his deposition that his ability to walk long distances has been curtailed because of his leg, not his right shoulder. Likewise, Mr. Manfredi admitted that his current inability to wrestle with his son is a result of his back, not his right shoulder. Finally, the Court finds that his inability to ride his lawn mower is not indicative of serious right shoulder impairment.

Thus, the Court finds that Plaintiffs have failed to demonstrate that the torn rotor cuff and numbness seriously impaired the function of Mr. Manfredi's right shoulder.

B. Back.

Plaintiffs argue that the compression deformity or fracture of Mr. Manfredi's T-12 (lumbar sacral spine) constitutes a serious impairment of body function. However, the Court finds as a matter of law that Plaintiffs have failed to submit sufficient evidence that the impairment is sufficiently serious to maintain this action.

First, looking at the extent of the back impairment, one of Mr. Manfredi's own treating physicians, Dr. Mansmann, found that Mr. Manfredi has a 90% to 95% range of motion in his lumbosacral spine -- a range not indicative of serious impairment. As Plaintiffs have not offered any evidence to contradict one of his own physician's findings (other than a general complaint of pain) and have otherwise failed to show that the extent of Mr. Manfredi's back impairment has seriously limited Mr. Manfredi's use of his back, the Court finds that the impairment has not seriously effect the function of his back.

Second, as for the length of time of his back impairment, the Court finds that Plaintiffs have failed to present sufficient evidence regarding this criteria. There is no evidence that said impairment is permanent. Rather, one of Mr. Manfredi's own physicians, Dr. Brigham, as well as Dr. Askin, note that they believe that Mr. Manfredi's back impairment should completely heal.

Third, the type of treatment, therapy, does not support a finding of serious impairment. Other than anti-inflammatory medication, every doctor Mr. Manfredi has consulted has prescribed

only therapy in order to aid his back impairment. Further, Dr. Brigham reported that Mr. Manfredi only attended physical therapy sporadically.

Finally, a comparison of Mr. Manfredi's activities before and after the accident support a finding that the fracture has impaired the function of his back. However, that the injury might have affected his back function such that Mr. Manfredi is now not able to sit for long periods of time, wrestle with his son, or ride his lawn mower, the Court is not persuaded that this factor alone is sufficient to indicate that the impairment seriously affects the function of Mr. Manfredi's back.

Thus, the Court finds that Plaintiffs have failed to demonstrate that the fracture in his back seriously impaired the function of his back.

C. Left shoulder.

Plaintiffs argue that tendinitis in Mr. Manfredi's left shoulder constitutes a serious impairment of body function. However, the Court finds as a matter of law that Plaintiffs have failed to submit sufficient evidence that the injury seriously impaired the function of Mr. Manfredi's left shoulder.

First, looking at the extent of the left shoulder impairment, one of Mr. Manfredi's own treating physicians, Dr. Mansmann, found that Mr. Manfredi has 98% range of motion of his left shoulder -- clearly, not indicating a serious impairment. As Plaintiffs have not offered any evidence to contradict one of his own physician's findings (other than a general complaint of pain) and have

otherwise failed to show that the extent of Mr. Manfredi's left shoulder impairment has seriously limited Mr. Manfredi's use of his left shoulder, the Court finds that the impairment has not seriously affected the function of his left shoulder.

As for the length of time of his left shoulder impairment, the Court finds that Plaintiffs have failed to present sufficient evidence regarding this criteria. There is no evidence that said impairment is permanent. Rather, other than general complaints of pain, Plaintiffs only evidence regarding this criteria is that surgery may be required to heal the impairment. However, that surgery is required does not mean that the shoulder will not completely heal or that it has been injured for a lengthy period. In fact, one of Mr. Manfredi's own physicians, Dr. Brigham, as well as Dr. Askin, note that although surgery may be required they believe that Mr. Manfredi's left shoulder impairment will completely heal.

Although the third criteria, type of treatment, does weigh in favor of a finding that the injury to Mr. Manfredi's left shoulder is serious, the Court finds this factor alone insufficient to render such a finding.

Finally, as stated above with respect to Mr. Manfredi's right shoulder, a comparison of Mr. Manfredi's activities before and after the accident do not support a finding that the tendinitis has seriously impaired the function of his left shoulder.

D. Left arm, neck, left ankle, left leg, and right leg.

Plaintiffs argue that the sensation in Mr. Manfredi's left

arm, strain and sprain in his neck, sprain in his left ankle, and sensation in his legs constitutes serious impairments of those body functions. However, the Court finds as a matter of law that Plaintiffs have failed to submit sufficient evidence that those injuries have seriously impaired those parts of Mr. Manfredi's body.

First, looking at the extent of the impairment, Plaintiffs have failed to present any evidence (other than a general complaint of pain) demonstrating the extent of Mr. Manfredi's left arm, neck, left ankle, left leg, and right leg impairment. In fact, the only evidence presented to the Court regarding the limitations of those body parts was Dr. Askin's report, which indicated that he had (1) full range of active motion in his left arm, (2) 20 degrees of extension, 30 degrees right tilt, 40 degrees left tilt, 45 degree rotation to the right, and 30 degree rotation to the left in his neck, and (3) normal results with respect to his left ankle and legs. Since Plaintiffs have failed to explain or demonstrate that any of those results indicate serious impairment of those body parts, the Court finds they have failed their burden.

Second, as for the length of time of the impairments, the Court finds that Plaintiffs have failed to present sufficient evidence, as there is no evidence that said impairments are permanent. Rather, one of Mr. Manfredi's own physicians, Dr. Brigham, as well as Dr. Askin, note that they believe that all of Mr. Manfredi's impairments should completely heal. In fact, Dr. Askin's report indicates that Mr. Manfredi no longer has any left

arm, left ankle, or right leg impairment.

Third, there is no evidence that Plaintiff was prescribed any treatment for those impairments. At most, Plaintiff received physical therapy, and this treatment does not support a finding of serious impairment.

Finally, as stated above with respect to Mr. Manfredi's right shoulder, a comparison of Mr. Manfredi's activities before and after the accident do not support a finding that any of these injuries has seriously impaired the functions of the instant body parts.

Thus, Plaintiffs have failed sufficiently to demonstrate that any of his injuries affected his body functions to such an extent that they be deemed serious impairments, and the Court is convinced that the purpose of Michigan's no-fault insurance laws is to prohibit lawsuits like the instant one.

V. CONCLUSION

For the foregoing reasons,

NOW, THEREFORE, IT IS HEREBY ORDERED, ADJUDGED, AND DECREED that Defendant City of Detroit, City of Detroit Housing Commission, and Hosie King's motion for summary judgment be, and hereby is, GRANTED. Accordingly,

IT IS FURTHER ORDERED that since the instant findings relate to Plaintiffs' claims against all Defendant, this entire case be DISMISSED with prejudice.



Gerald E. Rosen
U.S. District Court Judge

UNITED STATES DISTRICT COURT
EASTERN DISTRICT OF MICHIGAN
SOUTHERN DIVISION

JOHN MANFREDI and
JANICE MANFREDI,

Plaintiffs,

vs.

No. 92-CV-75201-DT
Hon. Gerald E. Rosen

LORRAINE CAB COMPANY, GERALD
EUGENE MILLER, CITY OF DETROIT,
CITY OF DETROIT HOUSING
COMMISSION, HOSIE KING,
DEPENDABLE LAWN SERVICE, INC.,
AND WILLIE B. MORRIS,

Defendants.

JUDGMENT

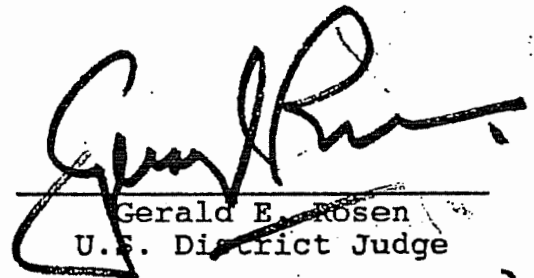
At a session of said Court, held in
the U.S. Courthouse, Detroit, Michigan
on JUL 30 1993

PRESENT: Honorable Gerald E. Rosen
United States District Judge

The Court on this day has entered an Opinion and Order
granting Defendants' Motion for Summary Judgment.

NOW, THEREFORE, IT IS HEREBY ORDERED, ADJUDGED, AND DECREED
that the Defendants' Motion for Summary Judgment be GRANTED.
Accordingly,

IT IS FURTHER ORDERED that this case be DISMISSED with
prejudice.


Gerald E. Rosen
U.S. District Judge